# 1138983 Manually Signed Federal Signature Page

Potential persons who are to respond to the collection of information contained in the SEC 1972 this form are not required to respond unless the form displays a currently valid

(6/99)OMB control number.

MAY 1 5 2002

### **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption state exemption unless such exemption is predicated on the filing of a federal notice.

# **UNITED STATES** SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

02036711

FORM D

MAY 2 3 2002 THOMSON

OMB APPROVAL

OMB Number: 3235-0076

Expires: May 31, 2002

Estimated average burden hours per response.. . 1

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY					
Prefix		Serial			
DATE RECEIVED					

Name of Offering (check if this is an amendment and name has changed, and indicate change.)

HCM Venture Fund, L.P.

Filing Under (Check box(es) that apply):

[ ] Rule 504 [ ] Rule 505

[X]Rule

[ ] Section 4(6)

[] ULOE

Type of Filing: [] New Filing [X] Amendment

# A. BASIC IDENTIFICATION DATA

Name of Issuer (check if this HCM Venture Fund, L.P.	is an amendment a	ind name has chan	ged, and indica	ite change.)
Address of Executive Office Number (Including Area Cod	<b>,</b>	Street, City, State,	Zip Code)	Telephone
81 Beach Road, Belvedere,	California, 94920	(415) 435-1982	2	
Address of Principal Busine Telephone Number (Includir (if different from Executive (	ig Area Code)	mber and Street, C	ity, State, Zip C	ode)
Brief Description of Busines				
Private investment company	3			
Type of Business Organization				
[ ] corporation	[X] limited partner	rship, already form	ed []other(	please specify):
[ ] business trust	[ ] limited partners	ship, to be formed		
	no tra i I mai di minindi. Accordi i mangazian ang akti mangan akti mangan ang mangan ang mangan ang mangan an		ere konstanti katoli kenomin kunika menanci kunika dibanda da dalam katoli da da kenomin kunika da da da kenom	
		Month Year		
Actual or Estimated Date of	1011	2] [0][1]	[X] Actua	al ·
Incorporation or Organizati	on:	-1 [0][1]	[ ] Estin	nated
Jurisdiction of Incorporatio State: CN for Canada; FN for				e abbreviation fo

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: <u>Five (5) copies</u> of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

# State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

# A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
  - Each promoter of the issuer, if the issuer has been organized within the past five years;
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
  - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
  - Each general and managing partner of partnership issuers.

Check Box(es) [ ] that Apply:	Pro- [] moter	Beneficial Owner	[x] Executive Officer	[ ] Director	[ ] General and/or Managing Partner
Full Name (Last na	me first, if in	dividuạl)	en 1.0 2 de 1.07 - de roinning de roinning de reinning de reinning de reinning de reinning de reinning de rein		
Hovan, Kurt Steven					
Business or Resid	ence Addres	s (Number a	nd Street, City,	State, Zip Cod	e)
81 Beach Road, Belve	edere, CA 949	20			•
Check Box(es) [ ] that Apply:	Pro- [] moter	Beneficial Owner	[ ] Executive Officer	[ ] Director	[X] General and/or Managing Partner
Full Name (Last na	ıme first, if ir	ndividual)			
Hovan Capital Manag	gement, LLC				
Business or Resid	ence Addres	s (Number a	nd Street, City,	State, Zip Cod	e)
81 Beach Road, Belve	edere, CA 949	20		•	
Check Box(es) [ ] that Apply:	Pro-[] moter	Beneficial Owner	[ ] Executiv	e [] Director	- [] General and/or Managing Partner

Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) [ ] Pro- [ ] Beneficial [ ] Executive [ ] Direc- [ ] that Apply: moter Owner Officer tor	General and/or Managing Partner
Full Name (Last name first, if individual)	and the second s
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) [ ] Pro- [ ] Beneficial [ ] Executive [ ] Direc- [ ] that Apply: moter Owner Officer tor	General and/or Managing Partner
Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) [ ] Pro- [ ] Beneficial [ ] Executive [ ] Direc- [ ] that Apply: moter Owner Officer tor	General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
(Use blank sheet, or copy and use additional copies of this sheet, as	necessary.)

# **B. INFORMATION ABOUT OFFERING**

1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?								-	es X ]	No [ ]		
		· .	Answer	also in <i>i</i>	Appendi	ix, Colu	mn 2, if 1	filing un	der ULC	E.		
	t is the lual?			ment th	at will b	e accep	ted fron	n any		\$	100,000	)
			ermit joi		rship of	a singl	9			_	es x ]	No [ ]
given, solicita persor registe dealer	directly ation of a to be li ered with the life.	or indir purchas isted is h the SE than fiv	ectly, ar sers in c an asso C and/o ve (5) pe	ny commonny connecticularies of the connection o	nission on with erson o state or o be liste	erson wor similates of agent of agent of agent of attes, and are a nation for	ar remuing security of a brole list the security of a brole list the security of the security	neration ies in the ker or de name of ed perso	for e offerinealer the bro	ng. If a ker or uch a		
Full Na	ame (La	st name	first, if	individu	al)					ggyapi kandhandha ka	organización in electrica de la constitución de la	
Busine	ess or R	esidenc	e Addre	ss (Nun	nber and	d Street,	City, St	ate, Zip	Code)	-		
Name	of Asso	ciated E	Broker o	r Dealer	e en		at majana andri 1946 a Staden ( 1946, angre a	.com/mmymessassocials sales (Anticological)	akiforaki salakenda isunakusi herebuar	ecentrical design in section design in the section of the section		enderante en la meridia con con disc
						or Intend			chasers		All Star	tes
[AL]	[AK]	[AZ]	[AR]	[CA]	[co]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[ТХ]	[עד]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full N	ame (La	st name	e first, if	individu	ıal)							

Business or Residence Address (Number and Street, City, State, Zip Code)

Name	of Asso	ciated E	Broker o	r Dealer								
States	in Whic	ch Perso	n Listed	d Has So	olicited o	or Intend	ds to So	licit Pur	chasers			
(Chec	k "All Si	tates" oı	check i	individu	al States	s)			•	[ ]	All Stat	es
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[AI]	[KS]	[KY] <sup>/</sup>	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[sc]	[SD]	[TN]	[XT]	[บт]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Name	of Asso	ociated E	3roker o	r Dealer				ate, Zip				
	k "All S										All Stat	es
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[iA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[sc]	[SD]	[TN]	[TX]	[עד]	[VT]	[VA]	[WA]	[wv]	[WI]	[WY]	[PR]
Track to have to the diagraphic to	(Use	blank s	heet, or	copy a	nd use a	ddition	al copies	s of this	sheet, a	as neces	ssary.)	

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box " and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.

Type of Security	Aggregate Offering Price	Amount Already Sold
Debt	\$0	\$0
Equity	\$0	\$0
[ ] Common [ ] Preferred		
Convertible Securities (including warrants)	\$0	\$0
Partnership Interests	\$100,000,000	\$2,033,500
Other (Specify: ).	\$ 0	\$ 0
Total	\$100,000,000	\$2,033,500

Answer also in Appendix, Column 3, if filing under ULOE.

2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."

Answer also in Appendix, Column 4, if filing under

	Number Investors	Do	gregate llar Amount Purchases
Accredited Investors	15	\$2,	008,500
Non-accredited Investors	1	\$	25,000
Total (for filings under Rule 504 only)		. \$_	

3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.			
Type of offering	Type of Security	_	Dollar Amount Sold
Rule 505		_	\$
Regulation A	<del></del>	_	\$
Rule 504		_	\$
Total		_	\$
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
Transfer Agent's Fees	[	1	\$
Printing and Engraving Costs	[	]	\$
Legal Fees		x]	\$ 6,000
Accounting Fees		x ]	\$10,000
Engineering Fees		]	\$
Sales Commissions (specify finders' fees separately)		]	\$
Other Expenses (identify)	Į.	1	\$
Total		<b>x</b> ]	\$ 16,000

ULOE.....

b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."

\$99,984,000

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.

Officers, Directors, &	Payments To Others
[]\$	[]\$
[]\$	[]\$
[]\$	[]\$
[]\$	[]\$
[]\$	[]\$
[]\$	[]\$
[]\$	[]\$
[]\$:	[X] - \$99,984,000
[]\$	[X] - \$99,984,000
[X]\$9	9,984,000
•	[]\$ []\$ []\$

#### D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

lssuer (Print or Type) HCM Venture Fund, L.P.	Signature Date 3/8/02
Name of Signer (Print or Type)	Title of Signer (Print or Type)
Kurt S. Hovan	Managing Member, Hovan Capital Management LLC, General Partner

# **ATTENTION** Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

#### E. STATE SIGNATURE

1. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule? [] [X]

Yes No

# See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239,500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date /		
HCM Venture Fund, L.P.	Sed SIL	3/08/02		
Name of Signer (Print or Type)	Title (Print or Type)			
Kurt S. Hovan	Managing Member, Hovan Capital Management LLC, General Partner			

#### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

#### **APPENDIX**

	to non-ac	to sell ccredited s in State ltem 1)	3 Type of security and aggregate offering price offered in state (Part C-Item 1)	т	ype of inv unt purch (Part C-	5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)			
State	Yes	No		Number of Accredit ed Investor s	Amount	Number of Non- Accredit ed Investor s		Yes	No
AL									
AK					·				
AZ						•			

AR							-	
CA	X		Limited Partnership Interests \$100 million	3	\$310,000	1	\$25,000	X
со								
СТ								
DE								-
DC								_
FL								
GA								
ні								
ID		·						
IL	x		Limited Partnership Interests \$100 million	1	\$80,000			x
IN								
IA								
KS	·							-
KY								

LA							
			<u> </u>				
ME							
MD		·					
MA	X	Limited Partnership Interests \$100 million	2	\$144,000			x
МІ							
MN				-			
MS							
МО							
MT						d f	
NE							
NV	X	Limited Partnership Interests \$100 million	1	\$475,000			X
NH							
NJ	X	Limited Partnership Interests \$100 million	3	\$254,000			x
NM.	·						·
NY	X	Limited Partnership Interests \$100 million	3	\$561,000	·		X

۴.

					1				
NC									
ND									
ОН						·			
ОK	-	-							
OR								·	
РА									
RI									
sc									
SD			·						`-
TN									
ТХ	X		Limited Partnership Interests \$100 million	1	\$100,000				x
UT									
VT									
VA	X		Limited Partnership Interests	1	\$84,500°		·		

<sup>\*</sup> Of this aggregate amount, \$73,000 was invested in the Fund while the investor was a resident of the District of Columbia.

		\$100 million				
WA						
wv					,	
WI						
WY		·				
PR						

http://www.sec.gov/smbus/forms/d.htm Last update: 08/27/1999